

## **APPLICATION DATA SHEET**

### **Application Information**

Application Number::	Not yet assigned
Filing Date::	Herewith
Application Type::	Utility
Subject Matter::	Regular
CD-ROM or CD-R?::	No
Number of CD Disks::	0
Number of Copies of CDs::	0
Sequence Submission?::	No
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	0
Title::	OSTEOGENIC DEVICES
Attorney Docket Number::	STK-010C3
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	0
Total Drawing Sheets::	30
Small Entity?::	
Licensed US Govt. Agency::	No
Contract or Grant Numbers::	-
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.A.
Status::	Full Capacity
Given Name::	Hermann
Middle Name::	-
Family Name::	Oppermann
Name Suffix::	-
City of Residence::	Medway

State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 25 Summer Hill Road  
City of Mailing Address:: Medway  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02053

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Thangavel  
Middle Name:: -  
Family Name:: Kuberasampath  
Name Suffix:: -  
City of Residence:: Medway  
State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 6 Spring Street  
City of Mailing Address:: Medway  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02053

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: C.  
Family Name:: Rueger  
Name Suffix:: -  
City of Residence:: West Roxbury  
State or Province of Residence:: MA

Country of Residence:: U.S.A.  
Street of Mailing Address:: 150 Edgemere Road, Apt. #4  
City of Mailing Address:: West Roxbury  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02132

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Engin  
Middle Name:: -  
Family Name:: Ozkaynak  
Name Suffix:: -  
City of Residence:: Milford  
State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 44 Purdue Drive  
City of Mailing Address:: Milford  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 01757

#### **Correspondence Information**

Correspondence Customer Number:: 021323

#### **Representative Information**

Representative Customer Number:: 021323

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	is a continuation of non-provisional application	09/956,582	09/19/2001
09/956,582	is a continuation of non-provisional application	09/074,299 (Patent No. 6,297,213)	05/07/1998
09/074,299	is a continuation of non-provisional application	08/417,071 (Patent No. 5,814,604)	04/04/1995
08/417,071	is a continuation of non-provisional application	08/145,812 (Patent No. 5,750,651)	11/01/1993
08/145,812	is a divisional of non-provisional application	07/995,345 (Patent No. 5,258,494)	12/22/1992
07/995,345	is a divisional of non-provisional application	07/315,342 (Patent No. 5,011,691)	02/23/1989
07/315,342	is a continuation-in-part of non-provisional application	07/232,630	08/15/1988
07/232,630	Is a continuation-in-part of non-provisional application	07/179,406 Patent No. 4,968,590	04/08/1988

**Assignee Information**

Assignee Name:: Stryker Biotech Corporation  
City of Mailing Address:: Hopkinton  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.